1,	19,20,		Application or Docket Number				ber					
Effective December 29, 1999  Off 50 46 Fundamental Part of the Par												
		CLAIMS AS	FILED -	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY						
FO	R	NUMBE	NUMBER FILED		NUMBER EXTRA		TE	FEE	]	RATE	FEE	
BA	SIC FEE				/			345.00	OR		690.00	
то	TAL CLAIMS	2	minus 2	20= 1	· 4		9=		OR	X\$18=	72-	
IND	EPENDENT CL	AIMS	3. minus :	3 = *	*		 19=		OR	X78=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT				30=		OR	+260=	•	
* If the difference in column 1 is less than zero, enter "0" in column 2							TAL	].	1	TOTAL	Mag	
		A PA PANA	MENDED	10	IAL		OH	OTHER	THAN			
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R/	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 24	Minus	24	= /.	X\$	9=	,	OR	X\$18=		
	Independent	. 3	Minus	···3	= /	X:3	9=			X78=		
٧	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT CLA	IM /				OR	7,70-		
	<del>; -</del> -			+13	30=		OR	+260=				
									OR	TOTAL ADDIT. FEE		
		(Column 1)	•									
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	=	X3	9=	<del></del>	OR	X78=		
<u>ر</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>				
							30=		OR	+260=,		
					•	T ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)						٠.					
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$	9= -		OR	X\$18=		
	Independent	*	Minus	***	= .	X3	9=			X78=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	-		
	f the entry in eater	mn 1 io loss than 1	+10			OR	+260=					
**	If the "Highest Nu	mn 1 is less than th mber Previously Pa mber Previously P	T ADDIT	OTAL . FEE		OR	TOTAL ADDIT. FEE					
		mber Previously Pa her Previously Pa				er found in	the an	nronriate ho	x in co	lumn 1		

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/604696

## Total Fee Calculation

				-		
	Fee Cade	Tatal # Claims	Number Extra X	Fcc	Fec =	Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101	hul	1		<del></del>	<u>1090</u>
Total Claims >20	203/103	24 .20 -	<u> 4</u> .×		<u> 18</u> , -	72
Independent Claims >1	202/102	3 .1-	x		<u> 78</u> -	
Mult. Dep Claim Present	204/104			· .		<del></del>
Surcharge	205/105	• • • • • • • • • • • • • • • • • • • •				<u>130</u>
English Translation	119				•	
TOTAL FEE CALCULA	ATION					
Fees due upon filing t	he application:			·		
Total Filing Fees Due	= 5	89	2	·		·
Less Filing Fees Subm	uiπed - S	4	<u> </u>			
BALANCE DUE	<u>=</u> \$	892	<u> </u>			
Office of Initial Patent	Examination			·		

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)